

Appl. No. 10/637,221
Reply to Office Action of March 12, 2008
Amendment Dated June 12, 2008

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REMARKS

Claims 1-46 and 48-53 stand rejected. Claim 47 was previously cancelled.

Claims 1 and 28 have been amended herein. Therefore, claims 1-46 and 48-53 are pending and at issue.

As an initial matter, Applicants would like to thank Examiner Lauritzen for granting a telephone interview to discuss the claims in the present application and how they distinguish over the cited art. The claims have been amended in accordance with the discussions during the interview. Specifically, claim 1 has been amended to recite a support system to directly contact and support the patient's breast in a fixed position. This amendment is supported on page 6, I. 2 and I. 19-22, Figures 1, 6A and 6B, as well as throughout the specification. Claim 28 has been amended to similarly recite supporting the patient's breast in a fixed position. This amendment is also supported at the above cited sections as well as throughout the specification.

Claims 1-46 and 48-53 stand rejected under 35 U.S.C. § 103(a) as allegedly being unpatentable over Carr in view of Meaney. This rejection should be withdrawn as Carr and Meaney, when each taken alone or in combination, fails to disclose or suggest one or more recited features in the claims.

Claim 1, from which claims 2-27 depend, has been amended to recite, amongst other structure, a system to support to directly contact and support the patient's breast in a fixed position while the patient lies in a prone position on the table. As properly acknowledged by the Office Action, Carr simply fails to disclose or suggest this structure. As discussed in the interview with Examiner Lauritzen, Meaney similarly fails

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to disclose or suggest the recited features as Meaney permits the patient's breast to hang unsupported in a glycerol/water solution. Therefore, Meaney also fails to disclose or suggest directly contacting and supporting the patient's breast, allowing the breast to instead float freely, possibly introducing discrepancies in the scan as the patient breathes or otherwise moves slightly.

Therefore, neither Carr nor Meaney discloses or suggests directly contacting and supporting the patient's breast in a fixed position while the patient is in a prone position. For this reason alone, the rejection of claims 1-27 should be withdrawn.

Claim 28, from which claims 29-40 depend, has been amended to recite similar features to those presented above with respect to claim 1. Specifically, claim 28 recites a method wherein the patient lies prone on a scan table and pressing the patient's breast against a scan plate to support the patient's breast in a fixed position. Thus, the patient's breast directly contacts the scan plate and is supported in a fixed position. For similar reasons to those presented above with respect to claim 1, the rejection of claims 28-40 is also improper and should be withdrawn.

Furthermore, claim 28 recites that the scan plate is microwave and optically transparent. As discussed during the interview, Carr does not discuss an optically transparent scan plate. Carr specifically describes the plate as being made of closed foam cell, which is not optically transparent. (Column 9, lines 27-28). Additionally, Carr discloses that the pads may include grids, thus further confirming that the plates are not optically transparent. (Column 9, lines 42-60). Specifically, Carr discusses including grids so that when examining a patient, an examiner can line up the bench marks 72

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with the grid lines so that common locations on the two breasts are measured because the examiner cannot see through the scan plates. (See column 9, lines 56-60).

Meaney, as discussed above, does not disclose any plate whatsoever, as the patient's breast is specifically left unsupported hanging in a liquid medium. Therefore, for this additional reason, the rejection of claims 28-40 is improper and should be withdrawn.

Claim 41, from which claims 42-45 depend, has been amended to recite orienting a patient's organ on an optically transparent scan plate. As explained above regarding claim 28, each of Carr and Meaney, when taken alone or in combination, fails to disclose or suggest the recited features. Therefore, for this reasons alone, the rejection of claims 41-45 is improper and should be withdrawn.

Additionally, claim 41 recites, amongst other steps, generating a 3D generated scan image of an organ, the scan image having a top planar envelope, generating a photo image of the imprint having the sized field of view and overlaying the photo image on the top planar envelope. Carr fails to disclose or suggest any photo or other optical imaging. As discussed above, in Meaney, the patient's breast hangs unsupported in a liquid medium. Therefore, Meaney et al. must utilize a 3-D optical image to properly image the patient's breast. This 3-D image is overlaid on the entirety of a 3-D scan. However, claim 41 recites overlaying the photo image on the top planar envelope, which is not 3-D, but is instead a flat 2-D image. The method recited in claim 41 does not require the complex calculations and computing to create and overlay a 3-D image on a 3-D scan, as disclosed in Meaney. Instead, the 3-D image is overlaid on the top planar envelope, which is 2-D. Therefore, as Carr and Meaney, each taken alone or in

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combination, fails to disclose or suggest the method of claim 41, this rejection should be withdrawn.

Claim 46 recites, amongst other features, an examination table having an optically transparent scan plate affixed to the table, similar to claim 28. Therefore, for similar reasons to those presented for claim 28, this rejection should also be withdrawn. Furthermore, Carr fails to disclose a pad, optically transparent or not, affixed to the table, as recited in claim 46. Meaney fails to disclose any scan plate whatsoever. For this additional reason, the rejection should be withdrawn.

Additionally, claim 46 recites that the optically transparent scan plate is located at horizontal upper surface of the table. Again, Carr only discloses a patient laying supine with the scan plate located on the patient's chest, therefore locating the plate away from the table. Meaney does not disclose any scan plate whatsoever. Therefore, for this additional reason, the rejection should be withdrawn.

Claims 11, 12, 13-16 and 39-40 stand rejected under 35 U.S.C. § 103(a) as allegedly being unpatentable over Carr in view of Haddad. As the above claims depend from either claim 1 or claim 28, Applicants believe that the Examiner intended the rejection to be over Carr in view of Meaney and further in view of Haddad. Regardless, the rejection should be withdrawn. As discussed above, Carr and Meaney, when taken alone or in combination, fails to disclose or suggest one or more features recited in claims 1 and 28. Haddad adds nothing in regards to these deficiencies. Therefore, as claims 11, 12, 13-16 and 39-40 depend from either claim 1 or claim 28, the rejection should be withdrawn and the claims allowed.

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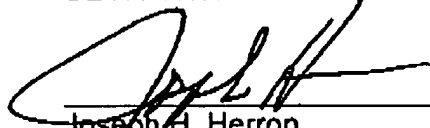
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Applicants respectfully request entry of the present amendment, reconsideration of the rejection of claims 1-46 and 48-53 and allowance of the case. The Patent Office is authorized to deduct any fees from Deposit Account No. 19-1351 to cover any additional fees. If such a withdrawal is made, please indicate the attorney docket number (33281-400290) on the account statement.

Applicants believe the present amendment places the application in condition for allowance. However, if the Examiner determines that the application is not yet allowable, Applicants request the Examiner contact the undersigned attorney.

Respectfully submitted,

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